



FAIRFAX COUNTY  
PUBLIC SCHOOLS

Jack D. Dale, Superintendent  
8115 Gatehouse Road  
Falls Church, Virginia 22042

September 2011

Dear Parent or Guardian:

Each school year, all Fairfax County Public Schools (FCPS) sixth, eighth, tenth, and twelfth grade students participate in the Fairfax Youth Survey. Fairfax County School Board has worked with the Fairfax County Board of Supervisors since 2001 to administer this survey in order to determine needs and assess effectiveness of prevention and intervention programs offered in the schools and community. The survey will be given to high school students during English class, middle school students during social studies class, and sixth grade students during a time selected by their teacher. The survey was designed to allow participants to complete it in one class period.

The survey focuses on risk behaviors, such as alcohol, tobacco, and drug use, as well as delinquency and violence. It also measures specific protective factors concerning health and safety that help youth refrain from high-risk behaviors. This year additional questions related to personal health, including eating disorders, obesity, and sexual behavior will be given to eighth, tenth, and twelfth grade students. County officials will analyze the information for use at the local level; however, no student is identified by name on the survey. If a student is uncomfortable with any question on the survey, the student does not have to answer that question or may elect to discontinue the survey. Additionally, while it is hoped that as many students as possible will participate, you have the option of declining permission for your child to participate in the survey.

The survey will be administered between November 9-11, 2011. A copy of the actual survey, as well as the survey fact sheet, will be available, starting September 20, 2011, to parents, guardians, or community members online at [www.fairfaxcounty.gov/youthsurvey](http://www.fairfaxcounty.gov/youthsurvey) and in the school counseling office of your child's school.

**If you do not wish for your son or daughter to participate, please complete the enclosed opt-out form and return it to your child's school counseling office by October 28, 2011.** If you have questions, please feel free to contact Clarence Jones, at 571-423-4270.

Sincerely,

A handwritten signature in dark ink, appearing to read 'Jack D. Dale', is written over a horizontal line.

Jack D. Dale  
Superintendent of Schools

JDD/jb  
Enclosures

## **2011 Fairfax Youth Survey OPT-OUT FORM**

Complete this form **only** if you **do not** wish your child to participate in the survey. Return it to your child's school counseling office no later than October 28, 2011.

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**I do not give permission** for my child to participate in the confidential *2011 Fairfax Youth Survey*. I understand that my child will be assigned to an alternative activity during the administration of the survey.

Student's Name (please print): \_\_\_\_\_

Student's School (please print): \_\_\_\_\_ Grade: \_\_\_\_\_

Signature of Parent or Guardian: \_\_\_\_\_

If you **do not** wish your child to participate in the survey, please return  
**NO LATER THAN October 28, 2011**, to:

Your Child's School Counseling Office